	CLAIMS ONLY	Application Number	Filing Date
		09776377	
		Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	✓		✓				51						
2		✓		✓			52						
3		✓		✓			53						
4		✓		✓			54						
5		✓		✓			55						
6		✓		✓			56						
7		✓		✓			57						
8		✓		✓			58						
9	✓		✓				59						
10	✓		✓				60						
11		✓		✓			61						
12		✓		✓			62						
13		✓		✓			63						
14		✓		✓			64						
15		✓		✓			65						
16		✓		✓			66						
17		✓		✓			67						
18	✓		✓				68						
19				✓			69						
20				✓			70						
21				✓			71						
22				✓			72						
23							73						
24							74						
25							75						
26							76						
27							77						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	4		4				Total Indep						
Total Depend	14		18				Total Depend						
Total Claims	18		22	A			Total Claims						